PTO/SB/08A (10-95)

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•				Application Number -	Not yet assigned. IC/\$14,575	
INFORMATION DISCLOSURE				Filing Date	Herewith	
STATEMENT BY APPLICANT (use as many sheets as necessary)			Y APPLICANT	First Named Inventor	MAHARSHAK, Arie Dr. Not yet assigned Not yet assigned	
				Group Art Unit		
			ets as necessary)	Examiner Name		
Sheet	1	of	1	Attorney Docket Number	P-6626-US	

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Examiner Initials*	Cite, No.	U.S. Paten	Kind Code ² (if known)	Name of Patentse or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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		Office ³	Number ⁴	Kind Code ⁵ (if known)	Name of Patentee or Applicant of Cited Document			1
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^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered, include copy of this form with next communication to applicant.

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